FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Rasali Entra

Parties must be filed electronically.

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2011 JAN 19	AM II: 18

Parties must be filed electronical	Réselvior		Mark allank
COMMITTEE NAME (Must be same as on Statement of Organ	nization)		and Ami
Citizens to Elect Rita Schmidt, Treasurer	·		FORM
IMPORTANT: Indicate by # type of committee you are reporting for: [2] (1)Statewide/Legislative/Judge Standing for Retention Candidate (2 (4)County Central Committee (5)County Candidate (6)City Candid Subdivision Candidate (8)County PAC (9)City PAC (10)School Bd 11) Local Ballot Issue)State PAC (3)State Party ate (7)School Board or Other Political	(Fo	DR-2 ev. 12/2009) DISCLOSURE REPORT r Office Use Only
CANDIDATE COMMITTEES ONLY: Candidate Name Rita Schmidt	Political Party (if applicable) Republican	Sc	gged In S 12 anned S 1
Office Sought County Treasurer	District (if Senate or House)	Au	dited
Late reports are subject to possible civil and criminal penalties. Purs candidate's committee, and the chairperson, for any other type of co	mmittee, is the individual responsible	7) and 68/ for filing ti	mely and accurate reports.
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE SIGNED
I AM FILING A October 15 thru December 31, 2010 (report date)	REPORT FOR (1) ELECTION A	·	ELECTION YEAR.
CHECK IF AMENDMENT TO REPORT DATED	· _		nittees, enter Date of Election
Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.))		ocal Committees, enter County in ion is held awk
STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the confidence of the last reporting period or must be zero if this is first	al of all funds held by the	\$	1,828.81
ADD TOTAL MONEY TAKEN IN THIS PERIOD		•	
Schedule A: Cash Contributions total (Attach Schedu	le A) (*also see in-kind below)		205.08
Schedule F: Loans Received total (Attach Schedule F			
Schedule H: Total Sales of Campaign Property (Attac			
(Schedule H applies to Candidates' Comm	nittees Only) SUB-TOTAL	\$	2033.89
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (Schedule F: Loan Repayments total (Attach Schedule			2033,89
CASH ON HAND at the end of this reporting period (if final repo	•		0.00
	•		
UNPAID BILLS (From Schedule D - Attach Schedule D)			*************************************
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sched			
**OUTSTANDING LOANS (From Schedule F - Attach Schedule	С Г)	Ф	YES ✓ NO
CONSULTANT BREAKDOWN (Schedule G Attached?) CANDIDATE COMMITTEES ONLY:			
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attac	ch Schedule H)	\$	

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens to Elect Rita Schmidt, Treasurer

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
b	CK THIS BOX IF NDING FORM

Resel Form

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10/19/10	ID# CK#	Greg Danskin 50 W. Northern Phoenix, AZ 85201		\$50.00	
10/25/10	ID# CK#	Thomas Schmitz 2843 Garden Circle Apache Junction, AZ 85120	Brother	100.00	
	ID# CK#	Unitermized Contributions		54.00	
11/15/10	ID# CK#				
12/07/10	ID# CK#				
	ID# CK#	US Bank - Bank account interest P. O. Box 1800 St Paul, MN 55101		1.08	
	ID# CK#				
	ID#				
	ID#				
	CK#				
	CK#		SUB-TOTAL	205.09	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

TOTAL (if last page of this schedule)

Page I of I (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
В	MONETARY
(Rev. 07/03)	EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens to Elect Rita Schmidt, Treasurer

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/21/10	ID# CK#	On Press Row c/o Gary Rima Waterloo, IA 50701	Radio Advertising	\$ 120.00
10/25/10	ID# CK#	LaPorte City Printing & Design 213 Main St. LaPorte City, IA 50651	Print Advertising	74.40
10/25/10	ID# CK#	Postmaster Hudson, IA 50643	Postage	274.69
10/26/10	ID# CK#	Hudson Printing 411 Jefferson St Hudson, IA 50643	Advertising	80.00
0/28/10	ID# CK#	On Media 212 W 2nd St. Cedar Falls, IA 50613	TV Advertising	400.00
0/28/10	ID#	Beau Batterson Cedar Falls, IA 50613	TV Production	200.00
1/03/10	ID# CK#	Pioneer Graphics 316 West 5th St. Waterloo, IA 50702	Print Advertising	390.55
1/12/10	ID# CK#	Cedar Falls Utilities I Utility Parkway Cedar Falls, IA 50613	TV Advertising	400.00
			SUB-TOTA	\$ 1939.64

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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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TOTAL (if last page of this schedule) \$

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization	COMMITTEE NAME	(Must be	same as on	Statement of	Organization
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Citizens to Elect Rita Schmidt, Treasurer

	T			
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/23/10	ID# CK#	The Progress Review 313 Main St LaPorte City, IA 50651	Print Advertising	\$ 21.70
12/13/10	ID# CK#	Don Schmidt 124 Thelma St Hudson, IA 50643	Sign materials & install	121.70
11/15/16	ID# CK#	Cedar Falls Utilities Cedar Falls, FA 50613	Advertising Refund	(24.00)
	ID# CK#	On Media Advertising Waterloo, FA 50702	Advertising Refund	(25.15)
	ID# CK#			
	ID# CK#			
	ID#			
	ID#			
			CUD TOTA	

SUB-TOTAL

94.25

TOTAL (if last page of this schedule)

\$2033.89

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entitles providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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